

Pro Se 15 (Rev. 12/16) Complaint for Violation of Civil Rights (Non-Prisoner)

FILED

2024 APR 25

CLERK

U.S. DISTRICT COURT

## UNITED STATES DISTRICT COURT

RECEIVED

2024 APR 24 PM 4:14

CLERK

U.S. DISTRICT COURT

for the

3rd District of Utah

Division

Case: 2:24-cv-00299

Assigned To : Oberg, Daphne A.

Assign. Date : 4/24/2024

Description: Jacobs v. Salt Lake City  
International Airport

Case No.

(to be filled in by the Clerk's Office)

Erika Jacobs

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

Jury Trial: (check one) ☒ Yes ☐ No

Salt Lake City International Airport

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

~~COMPLAINT FOR VIOLATION OF CIVIL RIGHTS~~  
COMPLAINT FOR VIOLATION OF CIVIL RIGHTS  
(Non-Prisoner Complaint)

## NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

**I. The Parties to This Complaint****A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name

Address

County

Telephone Number

E-Mail Address

Erika Jacobs  
 3700 Avenue B  
 Scottsbluff NE 69361  
City State Zip Code  
 Scotts bluff county  
 602-434-3107  
 Erika457@live.com

**B. The Defendant(s)**

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

**Defendant No. 1**

Name

Job or Title (if known)

Address

County

Telephone Number

E-Mail Address (if known)

Salt Lake City International AIRPORT  
 Bill Wyatt, CEO  
 P.O. Box 145550  
 Salt Lake City Utah 84114-5550  
City State Zip Code  
 Salt lake county  
 801-324-3441  
 unknown

☐ Individual capacity ☐ Official capacity

**Defendant No. 2**

Name

Job or Title (if known)

Address

County

Telephone Number

E-Mail Address (if known)

n/a  
  
  
  
City State Zip Code

☐ Individual capacity ☐ Official capacity

## Defendant No. 3

Name

Job or Title (if known)

Address

City

State

Zip Code

County

Telephone Number

E-Mail Address (if known)

☐

Individual capacity

☐

Official capacity

## Defendant No. 4

Name

Job or Title (if known)

Address

City

State

Zip Code

County

Telephone Number

E-Mail Address (if known)

☐

Individual capacity

☐

Official capacity

**II. Basis for Jurisdiction**

Under 42 U.S.C. § 1983, you may sue state or local officials for the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

A. Are you bringing suit against (check all that apply):

☐Federal officials (a *Bivens* claim)☒

State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the “deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws].” 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?

Plaintiff's right to clean and microbe free facilities. The Plaintiff brings this suit under 9th amendment, Equipment in use at the Salt Lake City Airport should be without defect

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials? n/a



- D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

The defendant did provide paramedics to the scene of the accident. Yet the paramedics were not able to resolve this deep wound in left leg and abrasion on right leg. The Salt Lake City International Airport was not in accordance of providing a clean facility for the use of passengers & a defective escalator.

### III. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. Where did the events giving rise to your claim(s) occur?

It occurred on the escalator at Salt Lake City International Airport

- B. What date and approximate time did the events giving rise to your claim(s) occur?

It happened on 6-29-22

- C. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

(1) I was riding up the escalator when my luggage fell back down the elevator. (Luggage is always falling down these escalators but I did not think it would happen to me). (2) I went to pick up my luggage and was tripped by the escalator. (3) I could not move and yelled for help. (4) The escalator had deeply wounded by impounding into my left leg until I was without mobility to move. (5) A gentle man turned off the escalator and saved my left leg. There was an employee of Salt Lake City International Airport that called paramedics. (6) The paramedics stated it was a deep wound in left leg. (7) The Plaintiff was in extreme pain but did not realize the severity of the injury at that moment. (8) The Plaintiff after consistent non-stop extreme intensity pain & inability to walk on left leg sought medical care on July 7th 2022 and other dates to no avail. The swollen legs were not relieved by antibiotics until Jan 2024. The Plaintiff is unable to walk without cane & brace on left leg.

**IV. Injuries**

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

① Left leg needs medical care in which the Plaintiff cannot afford. The left leg needs a brace and cane assistance to function normally. ② The Plaintiff has lost ability to do normal exercise, walk fast, run, jog & ride a bike. ③ The Plaintiff legs were infected by unknown bacteria on the escalator that caused her legs to be swollen in extreme unbearable pain from 6/29/22 to Jan 2024. The Plaintiff left leg cracked in September 2022 from the inflammation of pain in which doctors oversighted. Please see Exhibit A, Plaintiff attempts to resolve injury with the Salt Lake City International AIRPORT.

**V. Relief**

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

The Plaintiff request the Defendant pay for the medical care needed to restore the Plaintiff leg (left) back to normal mobility. The amount sought 76,000 or whatever the jury deems award/necessary.



**VI. Certification and Closing**

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

**A. For Parties Without an Attorney**

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:

4/21/24

Signature of Plaintiff

Erika Jacobs

Printed Name of Plaintiff

Erika Jacobs

**B. For Attorneys**

Date of signing:

pro-se

Signature of Attorney

pro-se

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

3700 Avenue B

Scottsbluff

City

NE

State

69361

Zip Code

Telephone Number

602-434-3107

E-mail Address

Erika457@live.com